

# ALPHABETICAL LISTING OF LONG-TERM CARE PROVIDERS WITH COMPLAINTS (Complaint Log)

From 10/01/2004 To 01/31/2006

Northern Virginia Long Term Care Ombudsman Program  
12011 Government Center Pkwy, Suite 708, Fairfax, VA. 22035-1104  
Intake line: (703) 324-5861

*M = Mediation*

*S = Systemic (facility-wide issues)*

## ***Aarondale Retirement and Assisted Living , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.44 Medications - administration, organization	Not Verified	Resolved
	F.47 Pressure sores	Not Verified	Resolved

## ***Annaburg Manor , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	B.13S Information regarding rights, benefits, services	Verified	Resolved
	B.15S Staffing information not posted	Verified	Resolved
	D.32S Privacy in treatment, confidentiality	Verified	Resolved
	F.41S Call lights, response to requests for assistance	Verified	Resolved
	M.97S Shortage of staff	Verified	Partially Resolved
Case 2-M	L.95 Communication with Family	Not Verified	Resolved

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## ***Arden Courts of Annandale , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	K.78S Cleanliness, pests	Verified	Resolved
	K.83 Odors	Verified	Resolved

## ***Arleigh Burke Pavilion , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Not Verified	Partially Resolved

## ***Brighton Gardens of Arlington , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.16 Admission contract and/or procedure	Verified	Resolved

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## ***Burke HealthCare Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Not Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.47 Pressure sores	Verified	Not Resolved
	M.98 Staff training, lack of screening	Verified	Resolved

## ***Cardinal Nursing and Rehabilitation Center at The Virginian, The , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.1 Abuse, physical (including corporal punishment)	Verified	Resolved
Case 2	F.48 Symptoms unattended, no notice to others of change in condition	Not Verified	Resolved
	F.52 Facility required unnecessary private sitter	Not Verified	Resolved

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## ***Cherrydale Health and Rehabilitation Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5    Gross neglect	Verified	Not Resolved

## ***Fairfax Nursing Center, Inc. , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1-M	C.19    Discharge/eviction - planning, notice, procedure	Verified	Resolved

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## ***Gardens at Fair Oaks , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.44 Medications - administration, organization	Verified	Resolved
Case 2	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Not Verified	Resolved
	F.44 Medications - administration, organization	Not Verified	Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Partially Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

## ***Heatherwood Retirement Community , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure		Withdrawn
Case 2	C.16 Admission contract and/or procedure	Verified	Not Resolved
	D.33 Response to complaints	Verified	Not Resolved

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## ***Home ElderCare , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Verified	Resolved
	C.16 Admission contract and/or procedure	Verified	Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	L.87 Abuse investigation/reporting	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

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## ***Iliff Nursing and Rehabilitation Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 2	F.44 Medications - administration, organization	Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 3	A.1 Abuse, physical	Not Verified	No action
Case 4	K.79S Equipment/building - disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Referred - No Action
	K.79S Equipment/building - disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Partially Resolved
	K.83S Odors	Verified	Resolved
Case 5	M.101 Supervision	Not Verified	Withdrawn

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## ***INOVA Commonwealth Care Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.44 Medications - administration, organization	Not Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	I.66 Resident conflict, including roommates	Verified	Resolved
	J.69S Assistance in eating or assistive devices	Verified	Resolved
	J.71S Menu - quantity, quality, variation, choice,condiments, utensils	Verified	Partially Resolved
	M.100 Staff unresponsive, unavailable	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 2	A.5 Gross neglect	Not Verified	Resolved
	D.26 Dignity, respect - staff attitudes	Verified	Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Resolved
Case 3	D.26 Dignity, respect - staff attitudes	Verified	Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Resolved
Case 4	M.97 Shortage of staff	Not Verified	Resolved

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Case 5	D.32	Privacy in treatment, confidentiality	Verified	Resolved
	K.78	Cleanliness, pests	Verified	Resolved
	K.79	Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved

## ***Johnson Center at Falcon's Landing , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.22	Room assignment/room change	Not Verified
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified
	F.48	Symptoms unattended, no notice to others of change in condition	Verified
	J.76	Improper Weighing	Verified
	L.90	Inadequate record-keeping	Verified

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## ***Leewood Healthcare Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	B.12 Information regarding medical condition, treatment and any changes	Not Verified	Resolved
	F.40 Accidental or injury of unknown origin; falls; improper handling	Not Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	F.47 Pressure sores	Not Verified	Resolved
	G.58 Therapies, outside	Not Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
Case 2	C.19 Discharge/eviction - planning, notice, procedure	Verified	Partially Resolved
Case 3	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 4	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 5	A.5 Gross neglect	Not Verified	Resolved
	F.40 Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved

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## ***Lincolnia Senior Residences , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	I.67 Social services - availability/appropriateness	Not Verified	Not Resolved

## ***ManorCare Health Services - Alexandria , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Not Verified	Resolved

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## ***ManorCare Health Services - Fair Oaks , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Verified	Partially Resolved
	B.12 Information regarding medical condition, treatment and any changes	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Partially Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Partially Resolved
	F.47 Pressure sores	Verified	Partially Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	G.57 Range of motion/ambulation/exercise	Verified	Partially Resolved
	J.69 Assistance in eating or assistive devices	Verified	Resolved
	J.70 Fluid availability/hydration	Verified	Partially Resolved
	J.75 Weight loss due to inadequate nutrition	Verified	Resolved
	K.83S Odors	Verified	Partially Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	M.101 Supervision	Verified	Resolved
Case 2	D.27 Exercise choice and/or civil rights (includes right to smoke)	Not Verified	Partially Resolved
	D.34 Reprisal, retaliation	Not Verified	Partially Resolved

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Case 3	M.97S	Shortage of staff	Verified	Partially Resolved
Case 4	A.5	Gross neglect	Not Verified	Resolved
	F.44	Medications - administration, organization	Verified	Resolved
Case 5	A.1	Abuse, physical (including corporal punishment)	Verified	Resolved
Case 6	F.50	Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use	Verified	Partially Resolved
Case 7	A.5	Gross neglect	Verified	Resolved
Case 8	F.40	Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44	Medications - administration, organization	Not Verified	Resolved
	L.90	Inadequate record-keeping	Verified	Resolved
Case 9	C.19	Discharge/eviction - planning, notice, procedure	Not Verified	Resolved
	F.48	Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	F.52	No Notification to Physician/No orders Given to Transfer	Verified	Resolved
	M.98	Staff training, lack of screening	Verified	Resolved

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Case 10	F.44	Medications - administration, organization	Verified	Resolved
Case 11	F.47	Pressure sores	Verified	Not Resolved

## ***Meadow Glen of Leesburg , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	D.35 Other - Autonomy, Choice, Exercise of Rights, Privacy	Not Verified	Resolved
Case 2	J.71S Menu - quantity, quality, variation, choice	Verified	Resolved

## ***Mount Vernon Nursing Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Not Verified	Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	No action

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## ***Potomac Center, Genesis ElderCare Network , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.46 Physician services, including podiatrist	Not Verified	Referred - No Report
Case 2	F.40 Accidental or injury of unknown origin; falls; improper handling	Not Verified	Withdrawn
	F.48 Symptoms unattended, no notice to others of change in condition	Not Verified	Withdrawn

## ***Professional Health Care , Home Health Agency***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	G.58 Therapies, outside	Verified	Resolved

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## ***Renaissance Gardens , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	F.49 Toileting, incontinent care	Not Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	M.101 Supervision	Verified	Resolved
Case 2	M.98 Staff training, lack of screening	Verified	Resolved
	A.5 Gross neglect	Not Verified	Resolved
	F.40 Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved

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## ***Sleepy Hollow Manor Nursing Home , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Not Verified	No action
	E.38 Personal property lost, stolen, used by others, destroyed	Verified	Not Resolved
Case 2	C.19 Discharge/eviction - planning, notice, procedure	Verified	Partially Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Not Verified	No action
Case 3	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
Case 4	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
	M.97 Shortage of staff	Verified	Partially Resolved
	M.98 Staff training, lack of screening	Not Verified	Resolved
Case 5	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
	M.97 Shortage of staff	Verified	Partially Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 6	A.5 Gross neglect	Not Verified	Resolved

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Case 6	F.40	Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Partially Resolved
	F.45	Personal hygiene (includes oral hygiene)	Verified	Not Resolved
Case 7	C.22	Room assignment/room change	Not Verified	Resolved
	L.88	Administrator(s) unresponsive, unavailable	Not Verified	Resolved
Case 8	M.97	Shortage of staff	Verified	Partially Resolved
Case 9	A.5	Gross neglect	Not Verified	Resolved
	F.45	Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	F.47	Pressure sores	Not Verified	Resolved
	J.70	Fluid availability/hydration	Not Verified	Resolved
	J.75	Weight loss due to inadequate nutrition	Not Verified	Resolved
Case 10	B.15	posting of staff	Verified	Not Resolved
	D.32	Privacy in treatment, confidentiality	Verified	Not Resolved

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## ***Sunrise Assisted Living at Fair Oaks , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	I.64 Activities - choice and appropriateness	Not Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
Case 2	E.38 Personal property lost, stolen, used by others, destroyed	Not Verified	Withdrawn
	F.44 Medications - administration, organization	Not Verified	Withdrawn
	F.45 Personal hygiene (includes oral hygiene)	Not Verified	Withdrawn

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## ***Sunrise Assisted Living of Arlington , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	I.64S Activities - choice and appropriateness	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved

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## ***Sunrise at Bluemont Park , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	D.26 Dignity, respect - staff attitudes	Verified	Partially Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Not Verified	Partially Resolved
Case 2	C.22 Room assignment/room change	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

## ***Sunrise at Hunter Mill , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.45S Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.83 Odors	Verified	Resolved
	M.97S Shortage of staff	Not Verified	Resolved

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From 10/01/2004 To 01/31/2006

Northern Virginia Long Term Care Ombudsman Program  
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## ***Sunrise at Mount Vernon , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	L.88 Administrator(s) unresponsive, unavailable	Verified	Resolved

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## ***Sunrise at Reston Town Center , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
Case 2	C.22 Room assignment/room change	Not Verified	Resolved
	C.23 Communication Regarding Room Assignment	Verified	Resolved
Case 3	B.12 Information regarding medical condition, treatment and any changes	Verified	Resolved
	C.22 Room assignment/room change	Verified	Partially Resolved
	E.38 Personal property lost, stolen, used by others, destroyed	Verified	Partially Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.46 Physician services, including podiatrist	Not Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

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## ***Sunrise of Alexandria , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	B.13S Information regarding rights, benefits, services	Verified	Not Resolved
	K.78S Cleanliness, pests	Verified	Not Resolved
	K.83S Odors	Verified	Resolved
	K.85S Supplies and linens	Verified	Resolved
Case 2	C.22 Room assignment/room change	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.51 Wandering, failure to accommodate/monitor	Verified	Resolved
	L.95 Alarms not heard on third floor	Verified	Partially Resolved
	M.101 Supervision	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 3	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	H.62 Psychoactive drugs - assessment, use, evaluation	Verified	Resolved
	J.76 Assistance to dining area	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved

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Case 3	K.79S	Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	L.90	Inadequate record-keeping	Verified	Resolved
Case 4	A.5S	Gross neglect	Verified	Resolved
	D.26S	Dignity, respect - staff attitudes	Verified	Resolved
	F.41S	Call lights, response to requests for assistance	Verified	Resolved
	F.42S	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.45S	Personal hygiene (includes oral hygiene)	Verified	Resolved
	F.45S	Personal hygiene (includes oral hygiene)	Verified	Resolved
	F.48S	Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	J.69S	Assistance in eating or assistive devices	Verified	Resolved
	J.70S	Fluid availability/hydration	Verified	Resolved
	K.78S	Cleanliness, pests	Verified	Resolved
	K.78S	Cleanliness, pests	Verified	Resolved
	K.79S	Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	K.79S	Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	K.83S	Odors	Verified	Resolved
	K.86S	Other - Environment	Verified	Resolved
	L.88S	Administrator(s) unresponsive, unavailable	Verified	Resolved
	L.95S	Staff member - no scout phone / name tag	Verified	Resolved

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Case 4	L.95S	No maintenance on phone system for 18 months +	Verified	Resolved
	M.100	Staff unresponsive, unavailable	Verified	Resolved
	M.101	Supervision	Verified	Resolved
	M.97S	Shortage of staff	Verified	Resolved
	M.97S	Shortage of staff	Verified	Resolved
	M.98S	Staff training, lack of screening	Verified	Resolved
	M.98S	Staff training, lack of screening	Verified	Resolved
	M.98S	Staff training, lack of screening	Verified	Resolved

## ***Sunrise of Fairfax , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.44	Medications - administration, organization	Resolved
	L.90	Inadequate record-keeping	Resolved
	M.98	Staff training, lack of screening	Resolved

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## ***Sunrise of Springfield , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.3 Abuse, verbal/mental (including involuntary seclusion)	Not Verified	No action
	C.16 Admission contract and/or procedure	Not Verified	No action
	K.78 Cleanliness, pests	Not Verified	No action
	P.128 Insurance coverage for Assisted Living Facility	Not Verified	Referred - No Report
Case 2	D.26 Dignity, respect - staff attitudes	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	J.76S Dietary - menu not posted with correct information	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Partially Resolved
	K.83 Odors	Verified	Resolved
Case 3	I.68S Current calendar not displayed	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved

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## ***Virginian, The , Assisted Living Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.1 Abuse, physical (including corporal punishment)	Not Verified	Resolved
	L.87 Abuse investigation/reporting	Verified	Resolved
	M.100 Staff unresponsive, unavailable	Verified	Resolved

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## ***Washington House, The , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.17 Appeal process - absent, not followed	Verified	Partially Resolved
	C.19 Discharge/eviction - planning, notice, procedure	Verified	Partially Resolved
Case 2	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.46 Physician services, including podiatrist	Not Verified	Resolved
	F.47 Pressure sores	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
Case 3	F.48 Symptoms unattended, no notice to others of change in condition	Not Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 4	J.71 Menu - quantity, quality, variation, choice	Verified	Resolved

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## ***Woodbine Rehabilitation and Healthcare Center , Nursing Facility***

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
Case 2	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan		Withdrawn
	F.47 Pressure sores		Withdrawn
	K.83 Odors		Withdrawn